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Inquiry Name: Inquiry into End of Life Choices

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SUBMISSION CONTENT:

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Rationale and qualifications

This is a personal submission, but it is partly informed by my association with a seniors' advisory panel and a number of large and important seniors' organisations in Victoria. Those associations have been at both grass-roots level through to State President and I believe I have a broader knowledge than some about the issues involved. The probability of individuals wishing to palliate or truncate the final stages of life increases with age so it might be logical that the views of those in this cohort should carry somewhat more weight than those of people remote from the ageing condition.

In my roles with seniors' organisations, I have discussed end-of-life issues with hundreds of people and I can only recall one single individual conversation in which a view was expressed that the person would not want some assistance in easing or speeding their final months, weeks or hours if recovery was not possible. In most cases, this was seen as a means of avoiding pain arising from accident or disease, but in quite a lot of cases, people said they would want to end their lives early to avoid indignity and/or unnecessary burden on the family or the community arising from the onset of dementia or other debilitating conditions.

Introduction

It would be truly wonderful if we all lived in a world free from pain, disease, tragedy and unhappiness, where we were all bursting with laughter and wellbeing every day and every night. Unfortunately, reality is not quite always like that and some people suffer great physical and emotional agony that is simply too much for them to endure. The threshold of tolerance varies between individuals, but at least for some, they simply want the pain to stop – and in many cases, the only way to stop it is to cease to exist, to sleep oblivious forever.

If the pain, physical or emotional, is likely to be remediable or of relatively short duration, there may be ways of assisting people through to a happier, pain-free outcome beyond such a dark time, but again, this is not always possible. I

applaud those who strive to help people through episodes of depression, and pain-killing drugs can ameliorate a degree of physical pain, but neither is necessarily a long-term solution and the side-effects are sometimes as bad as the problem they seek to address. Unless the cause of the pain, including psychological distress, is resolved, the suffering continues and some people, quite legitimately, just need it to stop.

For such people, suicide is the ONLY way out and the community has as much responsibility to assist them to cease their suffering in a safe and assured manner as it has to pour resources into helping other sufferers who are willing to continue to deal with their problems, at least for a little longer. There can be NO justification for investing large amounts of public resources on extending life for those people who do not, or cannot, look forward to a happier outcome in the future – whilst denying any form of assistance to those who do not want to endure endless pain and who see no light at the end of the tunnel.

Submission

Nobody has the right to require me to end my days in unnecessary pain and suffering. Nor does anyone have the right to preclude me taking precipitous action to avoid such a fate alone and desperate. I should be able to pursue my chosen form and time of exit surrounded by those who love me most and accept the legitimacy of my wishes. For government to mandate personal suffering and for the Police and Courts to harass my loved ones alleging 'assisted suicide' simply because they loved me seems quite evil. It is far too easy for naive legislators to create laws that deprive righteous people of their freedoms and for the enforcers to punish the innocent, simply because it is too difficult or inconvenient to identify and prosecute the guilty – who won't comply with the regulations anyway.

A large proportion of Victorian adults support some form of voluntary euthanasia and it seems anomalous that successive governments have all failed to exercise the courage to address such an obvious public concern. The 'Right to Life' is a concept that has been elevated to a ridiculous level of sanctity, but there is also a just-as-legitimate 'Right to Death' that is denied law-abiding citizens as a result of ill-founded conservative views imposed on the whole community by a small minority.

Suicide is no longer a crime, but nor is it an easy option. Increasingly, the conservatism of our legislators has removed the means by which any of us can pursue that option with safety or security. The knee-jerk reaction to a single tragedy resulted in my guns being taken from me when I had always felt confident that they provided me with a means of escape if that became my objective at any time in the future. Poisons and lethal drugs of any sort are very hard to obtain and driving off a cliff or into a tree is by no means a certain way of ending one's life.

Suicide, whether assisted or not, should be a legitimate option for anyone who has had enough pain, misery, unhappiness or suffering and just wants to end it all. Far too often, attempts to do this fail and a safe and certain means of exiting the world should be available to those who really desire it. I readily endorse the efforts of those trying to dissuade depressed people from taking that route, but if someone is determined to die, they will find a way and it is inhumane to preclude avenues by which such people could pursue their chosen path without pain, without endangering other people in the process, or without the risk of failure that could exacerbate their suffering and prevent them from taking action to succeed on a future occasion.

In considering how I would end my life if I ever found that necessary, I know I would want to use a method that is quick, painless and absolutely certain of success. Even shooting myself is not quite certain and the suffering an unsuccessful attempt would cause to myself and others would simply make an unbearable situation worse. Even if successful, at best, it would be horribly messy and would likely destroy the lives of those who discovered my mutilated remains. Electrocution may work (or it may not) but that would endanger those who found me and who would certainly be at risk when trying to check for vital signs or otherwise. Jumping off a cliff would have similar risks as well as incurring unnecessary public expense in recovering my body. And none of these options has the least dignity in death and by their nature, all preclude me having a peaceful pain-free death surrounded by my loved ones. In a modern democratic society, such an imposition by a few conservative do-gooders is simply not tenable.

It is entirely unconscionable for anyone or any institution, including the Parliament, to deny me my right to die or to impose such horrific risks and gross indignities on me and my loved ones - and thereby require me to endure endless pain and/or emotional distress simply because it/they do not have the courage to facilitate a suitable means for me to exercise my rights. Equally, it is quite immoral to penalise anyone who loved me so much that they would do something to assist me in defiance of a patently unjustifiable law. Even worse, it is clear that those who are left behind are often pursued relentlessly when they are at their rawest and most vulnerable by authorities who assume everyone is guilty and that they therefore must have been criminally complicit in facilitating a suicide.

If people want to die (and coincidentally save the government and the community a great deal of scarce public resources), they should be able to do so with safety and certainty – and a little dignity, in conditions of their choice. From what I have read, the best way to ensure those criteria is by ingesting or injecting a cocktail of lethal drugs, the acquisition of which is currently illegal. This is as absurd as it is unfair.

It is my contention that the necessary means of taking one's life safely and without pain should be available and it seems a pretty simple matter to put some controls in place to ensure they are not accessed and used improperly. Certainly, some controls need to be in place, so make it a bit bureaucratic and perhaps a little expensive, but there is no excuse for banning access to such necessary commodities. Once anyone has made up his/her mind to die, they will do it and neither government nor anyone else has the right to deny them a safe and dignified means of carrying out their decision. If access to the means of suicide are controlled, at least they can be monitored and those seeking access can be counselled and given extra time to reconsider.

End-of-life Directives

A matter that is obviously related to this is the regulation and practical issues surrounding Powers of Attorney impacting end-of-life issues. No matter how many documents are signed specifying our wishes in the event of a life-threatening incident, our recorded wishes are often ignored or remain unidentified until too late. In the event of an accident, paramedics will ALWAYS start treatment immediately they are called to the scene, DNR tattoos notwithstanding.

There is currently no effective way for a person to register their wishes in a manner that can be accessed by medical staff attending an accident victim. Even carrying an Advance Directive wherever one goes does not guarantee that it will

be found in an emergency. Even worse, even when one's wishes are clearly specified and understood, depending on the hospital to which one is unfortunately taken or the medical staff to which one is allocated, one's express wishes may be ignored and treatment pursued in direct contravention of an end-of-life directive. Moreover, in the event that such a directive is discovered after any form of treatment is commenced, few doctors or hospitals are willing to withdraw therapy: they will simply continue the course of action already commenced without regard to the patient's wishes. This is quite unconscionable and if a hospital or health professional is unwilling to comply with the wishes of a patient, alternative arrangements should be readily available. This might mean the allocation of different treating doctors or transfer to an alternative hospital/hospice or home – with suitable palliation being provided to meet the wishes of the patient – but the right to have one's wishes followed is unalienable.

Accessible Online Registry

This leaves one of the simplest issues to be addressed. Government should immediately establish a Registry accessible by authorised paramedics, doctors and hospitals so the wishes of each potential patient can be recorded and accessed before any unwanted therapies are applied. Increased flexibility should be provided with respect to the types of directives that may be recorded, but whatever is in the Register should be defined specifically enough that (for example) paramedics on their way to an incident can arrive at the scene with a clear understanding of the wishes of the victim.

Obviously, participation in the Registry should be entirely voluntary and tightly controlled, particularly with respect to personal identification – and registrants need to have an easy means of changing their record if their wishes change over time. Support should be available for people who wish to record or vary their wishes but who are unable to do so for any reason. This would be an invaluable public asset and one relatively inexpensive and easy to set up and maintain.

Conclusion

I do not underestimate the legal and administrative issues involved in these proposals, but as things stand at present, an albeit small sector of the community is being denied its right to choose a legitimate course of action by an equally small conservative sector and it is well past time that government moved to address this anomaly.

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File1:

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File3: